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23117 7590 03/12/2004

NIXON & VANDERHYE, PC
 1100 N GLEBE ROAD
 8TH FLOOR
 ARLINGTON, VA 22201-4714

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/852,261	05/10/2001	Geoffrey Goldspink	117-351	5457

TITLE OF INVENTION: REPAIR OF NERVE DAMAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/14/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
NICHOLS, CHRISTOPHER J	1647	530-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Nixon & Vanderhye P.C.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University College London

London, United Kingdom

East Grinstead Medical Research Trust

East Grinstead, West Sussex, United Kingdom

Please check the appropriate assignee category or categories (will not be printed on the patent);

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☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 5

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(Authorized Signature)

B. J. Sadoff, R g. No. 36,663 6/14/2004

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06/16/2004 ZJUHR2 00000217 09852261

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 02 FC:1504
 03 FC:8001

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